

Meeting Outline

For the Thursday, August 22, 2019 meeting of the Health Reform Task Force

Health Reform Task Force

Room 30 House Building, State Capitol Complex, Salt Lake City, Utah

1:00 p.m.

(Version: 08/15/19)

Approximate
Time Frame

1:00 1. Committee Business

Background

- [Draft minutes of the June 17, 2019 meeting](#)

Potential Action

- Approve minutes.

1:05 2. Medicaid Eligibility Expansion – Implementation Update

[2019 S.B. 96, Medicaid Expansion Adjustments](#), required the Utah Department of Health to seek federal approval to expand Medicaid eligibility under [several pathways](#) defined by the bill. The first pathway was approved and implemented beginning April 1, 2019. The department prepared a request to implement the second pathway, but on July 29, 2019, prior to submission of the request, the Centers for Medicare and Medicaid Services issued a [statement](#) ruling out approval of the request. Submission of a request for approval of the third pathway is due by March 15, 2020, and implementation of the fourth pathway is scheduled to occur July 1, 2020, if neither the second nor the third pathway is approved.

The Utah Department of Health will brief the task force on the implementation of S.B. 96, including the development of pathway requests and the number of individuals enrolled.

Background

- [Medicaid Adult Expansion Bridge Plan Report](#) (Source: Utah Department of Health)

Issues

- What is the status of the request to implement the second pathway, which includes an enhanced federal match rate for the April 1, 2019 expansion and a per capita limit on federal funding?
- Is Medicaid on pace to enroll 72,000 additional individuals under the 2019 S.B. 96 expansion as projected?

Presenters

- Nate Checketts, Deputy Director, Utah Department of Health

Potential Action

- Request additional information.

- 1:30 **3. In-Home Care**
The task force will be briefed on the opportunities and challenges faced by the in-home care industry. The industry provides in-home services by nurses, physical therapists, occupational therapists, speech therapists, social workers, home health aides, housekeepers, and respite providers.

Background

- [June 5, 2019 memo to Task Force chairs](#) (Source: Utah Association for Home Care)
- [Home health care services appropriations adjustments, FY 2020](#) (Source: Office of the Legislative Fiscal Analyst)
- Information presented to the Social Services Appropriations Subcommittee during the 2019 General Session:
 - [Appropriations Request](#) (Source: Utah Association for Home Care, 02/12/19)
 - [Home Care Services Presentation to the Social Services Appropriations Subcommittee](#) (Source: Utah Association for Home Care, 02/12/19)
 - [Home health care services supporting documentation](#) (Source: Submitted to the Social Services Appropriation Subcommittee 02/12/19)

Issues

- What role do in-home care providers play in the delivery of high-quality, affordable health care?
- Are there steps the Legislature could take to improve the appropriate use of in-home care providers?

Presenters

- Utah Association for Home Care
 - Clay Watson, President
 - Matt Hansen, Past President

Potential Action

- Determine next steps.

1:50

4. Healthcare Costs – Options for State Policymakers

PART 1 – Johns Hopkins Research on Prices (30 minutes)

At its June 17 meeting, the task force was briefed on research by Johns Hopkins' Bloomberg School of Public Health indicating that in recent years prices paid for health care have increased faster for commercial insurers than for government insurers. The task force will be briefed further on this research.

PART 2 – Value-Based Purchasing (40 minutes)

During the June 17 meeting, Johns Hopkins also highlighted the use of value-based purchasing arrangements by public and private insurers in other states. The task force will be briefed by the Public Employees Health Program on its response to [2019 S.C.R. 4, Concurrent Resolution Directing Creation of a Request for Payment Pilot Program](#), which directed PEHP to issue, by July 1, 2019, a request for proposals for healthcare services using a value-based payment methodology.

Background

PART 1 – Johns Hopkins Research on Prices

- From the Task Force's June 17, 2019 meeting:
 - [Controlling Health Care Spending -- Options for Utah Policymakers](#) (Source: Dr. A. Willink, Johns Hopkins Bloomberg School of Public Health)
 - [Inpatient Prices in Utah -- Preliminary Analysis Of MarketScan and Medicare Claims Data](#) (Source: Johns Hopkins Bloomberg School of Public Health)
 - [How are States Lowering Health Care Prices in the Private Sector: Policy Recommendations to HELP Committee](#) (Source: Aditi P. Sen. et. al., Johns Hopkins Bloomberg School of Public Health)

PART 2 – Value-Based Purchasing

- [Understanding Value-Based Insurance Design](#) (Source: Centers for Disease Control and Prevention)
- [Value-Based Insurance Design](#) (Source: National Conference of State Legislatures)
- [Center for Value-Based Insurance Design](#)
- [Value-Based Insurance Design Model \(VBID\) Fact Sheet CY 2020](#) (Source: Centers for Medicare and Medicaid Services)

Issues

PART 1 – Johns Hopkins Research on Prices

- How does the difference between Medicare and private healthcare prices in Utah compare with the difference in other states?
- How accurately does the data used in Johns Hopkins' research reflect the Utah healthcare market?
- How does relative bargaining power affect prices?

PART 2 – Value-Based Purchasing

- What response has PEHP received to its request for services under a value-based purchasing arrangement?
- Does the Legislature have a role in promoting value-based purchasing in the commercial health insurance market?

Presenters

PART 1 – Johns Hopkins Research on Prices (30 minutes)

- Johns Hopkins University
 - Dr. Amber Willink, Bloomberg School of Public Health
 - Dr. Matt Eisenberg, Bloomberg School of Public Health
 - Dr. Ge Bai, Carey Business School

PART 2 – Value-Based Purchasing (40 minutes)

- Mr. Chet Loftis, Director, Public Employees Health Program
- Roundtable discussion: *Should the Legislature promote value-based purchasing in the commercial health insurance market? If so, how?*
 - Dr. Russell Vinik, Chief Medical Officer, University of Utah Health Plans
 - Sean Dunroe, SelectHealth Assistant Vice President for Product Development, Business Development, and Strategy
 - Marc Bennett, President & CEO, Comagine Health (formerly HealthInsight and Qualis Health)
 - Dr. Amber Willink, Department of Health Policy and Management, Bloomberg School of Public Health, Johns Hopkins University
 - Written comments submitted by Utah Health Insurance Association

Potential Action

- Determine next steps.

3:00

5. Surprise Billing

The task force will continue its review of options to address unexpected balance billing by healthcare providers for out-of-network services (“surprise billing”).

Background

- From the Task Force’s June 17, 2019, meeting:
 - [Surprise Billing: An Overview of State and Federal Legislation](#) (Source: Office of Legislative Research and General Counsel)
 - [Balance Billing: Links to Summaries, Comparisons, and Text of State and Federal Legislation](#) (Source: Office of Legislative Research and General Counsel)

Issues

- If the state wishes to adopt a payment standard for unexpected out-of-network services, what should the standard be?

Presenters

- Mark D. Andrews, Policy Analyst, Office of Legislative Research and General Counsel
- Dr. Amber Willink, Department of Health Policy and Management, Bloomberg School of Public Health, Johns Hopkins University
- Other invited presenters
- Public comment

Potential Action

- Determine next steps.

4:00

6. Adjourn

The official agenda for this meeting is available [here](#).

Note: Links to background materials do not constitute endorsement of those materials by the Task Force or the Office of Legislative Research and General Counsel.